

USE THIS FORM FOR ALL ENTRIES EXCEPT CRAFTS

THE CLEVELAND MUSEUM OF ART
 FIFTIETH ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE
 MAY 1 to JUNE 16, 1968

PLEASE
LETTER
PLAINLY
OR TYPE

Collaborator _____

MISS:
MRS:
MR:

Artist _____

ROBERT
FIRST NAMEBorn in Cleveland YES NOEntered Previous May Shows? YES NO

Permanent Address _____

5026 HAWKINS RD. WEST RICHLAND 44286 SUMMIT

STREET

CITY

ZIP

COUNTY

LAESSIG
LAST NAME

Tel. 06-95674

Student Temporary Address _____

STREET

CITY

ZIP

COUNTY

Collect return shipment desired. YES NO Return address _____

Please bring Registration Fee of \$2.00 (Cash or Check) with your entries.

CLASS 1	MEDIUM W.C.	CLASS 1WC	MEDIUM W.C.	CLASS 1	MEDIUM W.C.												
TITLE MOONLIGHT INDIGO	TITLE FRAGILE SILHOUETTES		TITLE MEADOW TRAN														
DESCRIPTION & DIMENSIONS		DESCRIPTION & DIMENSIONS		DESCRIPTION & DIMENSIONS													
NUMBER FOR SALE	NUMBER IN EDITION (GRAPHIC PRTS.)	PRICE \$750	NUMBER FOR SALE	NUMBER IN EDITION (GRAPHIC PRTS.)	PRICE \$800												
Artist ROBERT LAESSIG FIRST NAME LAST NAME		Artist ROBERT LAESSIG FIRST NAME LAST NAME		Artist ROBERT LAESSIG FIRST NAME LAST NAME													
<div style="text-align: right;">549</div> <div style="text-align: center;">DO NOT WRITE IN THIS SECTION</div> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td>ACCEPTED</td> <td>REJECTED</td> </tr> <tr> <td colspan="2"><input checked="" type="checkbox"/></td> </tr> </table>		ACCEPTED	REJECTED	<input checked="" type="checkbox"/>		<div style="text-align: right;">550</div> <div style="text-align: center;">DO NOT WRITE IN THIS SECTION</div> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td>ACCEPTED</td> <td>REJECTED</td> </tr> <tr> <td colspan="2"><input checked="" type="checkbox"/></td> </tr> </table>		ACCEPTED	REJECTED	<input checked="" type="checkbox"/>		<div style="text-align: right;">SOLD! RHEEM</div> <div style="text-align: center;">DO NOT WRITE IN THIS SECTION</div> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td>ACCEPTED</td> <td>REJECTED</td> </tr> <tr> <td colspan="2"><input checked="" type="checkbox"/></td> </tr> </table>		ACCEPTED	REJECTED	<input checked="" type="checkbox"/>	
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This entry blank must be fully made out (typewritten or plainly lettered for catalog purposes) and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by July 25, 1968.

It is also understood that accepted entries will remain on exhibition until June 16 1968.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Robert A. Laessig
SIGNATURE

RETURN DATES FOR OBJECTS - Monday through Saturday 9 a.m. - 4:45 p.m. at Museum Service Entrance

SUBMIT ENTRIES WITH ENTRY BLANK AND
FEE MARCH 9 THROUGH MARCH 16, 1968

Submit one entry blank in triplicate per person. One copy, complete with juror's marks, will be returned to you as notification of acceptance or rejection. THIS COPY IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This form in triplicate is made up of N C R paper which does not require carbon.

REJECTED: May 6 - May 11

ACCEPTED: June 24 - June 29

MAY 14 1968
3/3 Cash